PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number
10787051

CLAIMS AS FILED – PART I

	(Column 1)	(Column 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))				$	OR		$ 770
TOTAL CLAIMS (37 CFR 1.16(c))	79 minus 20 =	• 59	X $ =		OR	X $ 18 =	1062
INDEPENDENT CLAIMS (37 CFR 1.16(b))	14 minus 3 =	• 11	X $ =		OR	X $ 86 =	946
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ $ =		OR	+ $ =	——
			TOTAL		OR	TOTAL	2778

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
AMENDMENT A	Total (37 CFR 1.16(c))	•	Minus	**	=	X $ =		OR	X $ =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	X $ =		OR	X $ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $ =		OR	+ $ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
AMENDMENT B	Total (37 CFR 1.16(c))	•	Minus	**	=	X $ =		OR	X $ =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	X $ =		OR	X $ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $ =		OR	+ $ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDI-TIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDI-TIONAL FEE
AMENDMENT C	Total (37 CFR 1.16(c))	•	Minus	**	=	X $ =		OR	X $ =	
	Independent (37 CFR 1.16(b))	•	Minus	***	=	X $ =		OR	X $ =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ $ =		OR	+ $ =	
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2